

## **Application Data Sheet**

### **Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
Suggested Group Art Unit:: N/A  
CD-ROM or CD-R?:: None  
Sequence submission?:: None  
Computer Readable Form (CRF)?:: No  
Title:: PULMONARY VEIN ABLATION STENT  
AND METHOD  
Attorney Docket Number:: 022727-0092  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Total Drawing Sheets:: 5  
Small Entity?:: Yes  
Petition included?:: No  
Secrecy Order in Parent Appl.?:: No

### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Ireland  
Status:: Full Capacity  
Given Name:: David  
Family Name:: Keane  
City of Residence:: Wellesley  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address:: 51 Woodside Avenue  
City of mailing address:: Wellesley  
State or Province of mailing address:: MA  
Postal or Zip Code of mailing address:: 02482-2205

**Correspondence Information**

Correspondence Customer Number:: 021125

**Representative Information**

Representative Customer Number:: 021125

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	09/539,056	03/30/00

**Assignee Information**

Assignee name:: THE GENERAL HOSPITAL  
CORPORATION d/b/a MASSACHUSETTS  
GENERAL HOSPITAL

Street of mailing address:: 55 Fruit Street

City of mailing address:: Boston

State or Province of mailing address:: MA

Postal or Zip Code of mailing address:: 02114